



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/941,004 Confirmation No. 6202

Applicant : Komoro, et al.

RECEIVED

Filed : 08/28/2001

DEC 20 2004

TC/A.U. : 2612

Technology Center 2600

Examiner : Aggarwal, Yogesh K.

Docket No. : TI-30154

Customer No. : 23494

For : MICROMINIATURE IMAGE PICKUP DEVICE

## AMENDMENT UNDER 37 C.F.R. §1.111 TRANSMITTAL FORM

Mail Stop Amendment  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

MAILING CERTIFICATE UNDER 37 C.F.R. §1.8(A) I  
hereby certify that this correspondence is being deposited  
with the United States Postal Service as first class mail in  
an envelope addressed to: Mail Stop Amendment,  
Commissioner for Patents, P. O. Box 1450, Alexandria, VA  
22313-1450.

*Lottie Davis*  
Lottie Davis

12-9-04  
Date

Sir:

1. Transmitted herewith is an amendment for this application.

## STATUS

2. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136  
apply. Applicant is other than a small entity.(a)  Applicant petitions for an extension of time under 37 CFR 1.136 (fees: 37 CFR  
1.17(a)-(d) for other total number of months checked below:

	Extension (months)	Fee for other than small entity
<input type="checkbox"/>	one month	\$ 110.00
<input type="checkbox"/>	two months	\$ 400.00
<input type="checkbox"/>	three months	\$ 920.00
<input type="checkbox"/>	four months	\$ 1,440.00

Fee \$ -0-

If an additional extension of time is required please consider this a petition therefore.

An extension for \_\_\_\_\_ months has already been secured and the fee paid therefore of \$ \_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_

OR

(b)  Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

## FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total Claims	17	Minus	20	= 0	x \$18 =	\$ 0
Independent Claims	1	Minus	3	= 0	x \$86 =	\$ 0
TOTAL ADDITIONAL FEE FOR THIS AMOUNT						\$ 0

(c)  No additional fee for claims is required.

OR

(d)  Total additional fee for claims required \$ -0-

## FEE PAYMENT

If any additional extension and/or fee is required, charge Deposit Account No. 20-0668 and/or if any additional fee for claims is required, charge Deposit Account No. 20-0668. Two copies of this sheet are enclosed.

Respectfully submitted,  
Texas Instruments Incorporated

By   
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